

CLAIMS ONLY

EXAMINER

FILING DATE

APP. NO.

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	2	1	2	1	2	1
TOTAL DEP.	10	1	11	1	11	1
TOTAL CLAIMS	12	2	13	2	13	2

	★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.	1	1	1	1	1	1
TOTAL DEP.	1	1	1	1	1	1
TOTAL CLAIMS	2	2	2	2	2	2

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS